

Form CPF M 102: Campaign Finance Reply of Beverly Municipal Form CITY CLERKS OFFICE

Office of Campaign and Political Finance

2014 JAN 21 A 8: 25

f Massachusetts File with: City or Town Clerk or Election Commissi
Fill in Reporting Period dates: Beginning Date: October 29, 2013 Ending Date: December 31, 2013
Type of Report: (Check one)
Mathew J. St. Hilaire The St. Hilaire Committee Candidate Full Name (if applicable) Committee Name
City Council At Large Office Sought and District Sensifer Dwn Name of Committee Treasurer
27 R West Street Unit 5 Beverly MA Residential Address P.O. Box 5073 Beverly MA 01915 Committee Mailing Address
Celephone Number (optional): Telephone Number (optional).
SUMMARY BALANCE INFORMATION:
Line 1: Ending Balance from previous report \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Line 2: Total receipts this period (page 3, line 11)
Line 3: Subtotal (line 1 plus line 2) \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Line 4: Total expenditures this period (page 5, line 14) # 5 361, 98
Line 5: Ending Balance (line 3 minus line 4) \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Line 6: Total in-kind contributions this period (page 6) \$ 90, 21
Line 7: Total (all) outstanding liabilities (page 7)
Line 8: Name of bank(s) used: Salem Five
ffidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance extinity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and habilities for this reporting period and represents the campaign name activity of all persons acting under the authority of on behalf of this committee in accordance with the requirements of M.G.L. c. 55. [Treasurer's signature] OR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check I hox only)
Candidate with Committee and no activity independent of the committee 1 certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.
Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the joint for this committee in accordance with the requirements of M.G.L. e. 55. [Candidate's signature] [Candidate's signature] [Candidate's signature]

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received Name and Residential Address (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)
10/30	The Jones Committee 01864 249 Pork St., N. Reading, MA	\$100,00	
11/4	Darrell Crate 810 Hale St., Beverly, MA 01915	₹ 250,00	Owner. Easterly Capital, LLC
	:		
		:	
Line 9: Total Recei	ipts over \$50 (or listed above)	\$ 350,00	
Line 10: Total Rece	sipts \$50 and under* (not listed above)	\$ 760,00	
	RECEIPTS IN THE PERIOD	'	← Enter on page 1, line 2
* If you have itemized	I receipts of \$50 and under, include them in line	e 9. Line 10 shoul	d include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

	Name and Residential Address	Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
			1
		7	
· ·			
Line 9: Total Recei	pts over \$50 (or listed above)		
ine 10. Total Daga	ipts \$50 and under* (not listed above)		
Line 10. Total Rece	This and and inder (not listed above)		
Line 11: TOTAL F	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2
	least to a COSO and and include them in line	O. Line 10 shoul	I

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

report all expenditures. Please include your committee name and a page number on each page.)

report all expenditures. Please include your committee name and a page number on each page.)						
Date Paid	To Whom Paid	Addwaga	Duwnoso of Evnanditure	Amount		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
11/5/13	Facebook	1 Hacker Way Menlo Park, CA 94025	Face book Advertising	\$ 194,69		
11/5/13	Google	1600 Amphitheutre Way Mantain View, CA 94043		\$500,41		
11/4/13	Home Depet	235 Independence Way Denvers, MA 01926	Electron Day Supplies	\$ 65.86		
M/20/13	Mat St. Hilaire	27R West St. #5 Beverly, MA 01915	Remibursement for Campurgn Expuses	\$ 100,00		
10/29/13	Thriftco	26 Howley St. Penbedy, MA 01960	Mailrag	\$ 2,018, 33		
1929/13	Thriftco	26 Howley St. Penbedy MA 01960	Postege for Moving	\$2,066.00		
M1/13	U.S. Postal Service	36 West St. #3 Beverly, MA 01915	Postage	138,00		
11/12/13	Wildhorse Cafe	342 Cabet St. Beverly, MA 01915	Political meeting	8 99.67		
Line 12: Total Expenditures over \$50 (or listed above)			\$5,182.96			
Line 13: Total Expenditures \$50 and under* (not listed above)			#179.07			
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD [5, 36 1, 98] If you have itemized expenditures of \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized						

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid			1
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
			,	
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and a	under* (not listed above)	
1 14. TOTAL EXPENDITURES IN THE DEDIAD				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD If you have itemized expenditures of \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized				

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
11/1/13	Katherine McClain	9 Parsons HIM Wenham, MA 01984	Envelopes	\$90.21
		Line 15: In-Kind Contributions over \$50 (or listed above)		
	,	Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line $6 \rightarrow$	6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS		

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
			,	
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTAND	DING LIABILITIES (ALL)	0